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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Paul et al.

ART UNIT:
1648

FILED: June 1, 2006

EXAMINER:
Peng, B.

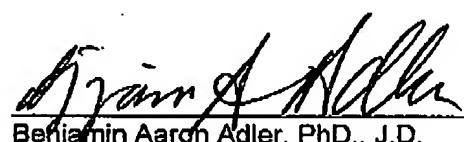
SERIAL NO.: 10/581,295

DOCKET:
6813FOR: Lupus Antibodies for Passive
Immunotherapy of HIV/AIDS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
ATTN: Art Unit 1648, Examiner Peng

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this Revocation/New Power of Attorney & Change of Correspondence Address was transmitted via facsimile to Examiner Bo Peng at 571-273-8300 on the date indicated:

Date: Apr 3, 2009


Benjamin Aaron Adler, Ph.D., J.D.

SUBMISSION OF REVOCATION WITH NEW POWER OF ATTORNEY
AND CHANGE OF CORRESPONDENCE ADDRESS

Dear Sir:

Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address Form signed by the Applicant Sudhir Paul is submitted. Applicant appoints the undersigned to prosecute the above-referenced patent application before the U.S. Patent and Trademark Office. The Board of Regents of the University of Texas System assigned the entire right, title and interest back to the Applicants in an assignment recorded at Reel/Frame 0188728/0657 on January 9, 2007.

Respectfully submitted,

Date: Apr 3, 2009
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02/02

PTO/SB/81 (01-09)

Approved for use through 11/30/2011. OMB 0651-0726
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**POWER OF ATTORNEY
OR
REVOCATION OF POWER OF ATTORNEY
WITH A NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/581,295
Filing Date	June 1, 2008
First Named Inventor	Paul, Sudhir
Title	Lupus Antibodies for Passive
Art Unit	1648
Examiner Name	Peng, B.
Attorney Docket Number	D6813

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number
----------------------	---------------------

I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number
Benjamin A. Adler, PhD, JD	

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number.

OR

The address associated with Customer Number:

OR

Firm or Individual Name	Benjamin A. Adler, PhD, JD		
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I am the:

Applicant/Inventor.

OR

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	Sudhir Paul	Date	03/19/2009
Name	Sudhir Paul	Telephone	713-385-4452
Title and Company	Professor, University of Texas - Houston Medical School		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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